

USE THIS SPACE (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	96		1/28/94
O.L.P.E. CLASSIFIER		43	2/10/90
FORMALITY REVIEW	M.M.	21629	2-15-90
RESPONSE FORMALITY REVIEW	M.M.	21629	4-11-90

INDEX OF CLAIMS

+ Rejected
 - Allowed
 (Through numeral) .. Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final Original	9/19/93 6/16/93 4/25/94 11/12/94 6/16/95 9/12/95 8/22/96
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Best Available Copy

If more than 150 claims or 10 actions
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